PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Parent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Application or Docket Number 10-70841

CLAIMS AS FILED - PART I						SMALL ENTITY			OTHER THAN					
(Column 1) (Column 2)						TYPE [TYPE L		SMALL	ENTITY				
TOTAL CLAIMS						RATE	FEE		RATE	FEE				
FOR			NUMBER F	FILED N	IUMBER EXTRA	BASIC FEE	3 §5.00	OR	BASIC FEE	7 70, 00				
TOTAL CHARGEABLE CLAIMS			??? minus 20= *		2	X\$ 9=	18	OR	X\$18=					
INDEPENDENT CLAIMS			3 minus 3 = *			X4:3=		OR	X8 b					
MULTIPLE DEPENDENT CLAIM PRESENT						+145		OR	+240=					
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL					
CLAIMS AS AMENDED - PART II							OTHER THAN							
		(Column 1)		(Column	2) (Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY				
AMENDMENT 4		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	R PRESENT ELY EXTRA	RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE				
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=					
	Independent	*	Minus	***	=	X43.=		OR	X8 6 =					
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	'ENDENT C	_AiM	+145=		OR	+240=					
						TOTAL		OR	TOTAL ADDIT. FEE					
		10.1		10.1	· · · · · · · · · · · · · · · · · · ·	ADDIT. FEE			ADDII. I CL					
_	IS AND THE OWNER OF THE PERSON	(Column 1) CLAIMS	PARTITION NAMED IN	(Column HIGHES	THE R. P. LEWIS CO., LANSING, MICH.		4.5.51	.	·	4501				
AMENDMENT		REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FO	R PRESENT SLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	Total	*	Minus	**	~	X\$ 9=		OR	X\$18=					
	Independent	*	Minus	***	=	X43 =		OR	X8 / _					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+29:0=					
						+145		OR						
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	•				
		(Column 1)		(Column	2) (Column 3)									
AMENDMENT .		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	T PRESENT BLY EXTRA	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	·				
	Independent	*	Minus	***	=	X43=		OR	X86=					
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT C	LAIM]		1						
						+145:		OR	+2 9 1=					
•	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2, write *0	T in column 3.1	TOTAL	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE							
•	If the "Highest Nu	mber Previously P	aid For IN THI	S SPACE is k	ess than 20, enter *20.	ADDIT FFF		JOR	ADDIT, FEE	<u> </u>				
•	If the "Highest Nu	mber Previously P	aid For IN THI aid For IN TH	S SPACE IS K IS SPACE IS I	ess than 20, enter *20. ess than 3, enter *3.*) is the highest numbe				ADDIT. FEE Olumn 1.	<u> </u>				